



Office of the Registrar  
ABAC 7, 2802 Moore Hwy  
Tifton Georgia 31793-2601  
Telephone: 229-391-5007  
Fax: 229-391-5301

## Request for a Replacement Diploma

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name as it appears on our records, if different: \_\_\_\_\_

ABAC ID# or SSN: \_\_\_\_\_

Date of graduation: \_\_\_\_\_

Current mailing address: \_\_\_\_\_

\_\_\_\_\_

Home Phone: \_\_\_\_\_ Work or Cell Phone: \_\_\_\_\_

### Please check the category that best describes your request:

\_\_\_ For students requesting a replacement or duplicate diploma who graduated less than one year ago, the replacement fee is **\$20.00** per diploma. (For credit card payments there will be an additional processing fee).

\_\_\_ For students requesting a replacement or duplicate diploma who graduated more than one year ago, the replacement fee is **\$50.00** per diploma. (For credit card payments there will be an additional processing fee).

Should you choose to pay by credit card, please contact the Student Accounts Office at 229-391-4924 OR you may enclose your payment along with this request and submit by mail to the above address. Credit card payment requests may be faxed.

Once the diploma request and payment has been received, it will be processed within 7 business days.

Signature of the Student:

\_\_\_\_\_ Date: \_\_\_\_\_